A02-0056 10/31/02



Application Form

BAXTER FENWAL DIVISION, MARICAO		
Name of facility*		
BAXTER HEALTHCARE CORPORATION		
Name of parent company (if any)		
ROAD 357 Km. 0.8		
Street address		
5.1001 ddd.1000		
PO BOX 832		
Street address (continued)		
MARICAO PR 00606		
City/State/Zip code		
Give us information about your contact person for the National		
Environmental Performance Track Program.		
Name Mr./Mrs./Ms./Dr. Mr. JOAQUIN AYALA		
Title ENVIRONMENTAL MANAGER		
Phone 787 838-3000		
Fax 787-838-2110		
E-mail joaquin_ayala@baxter.com		
Facility/Company Website www.baxter.com		

^{*} If you are applying for multiple facilities, you must call 1-888-339-PTRK(7875)

Why do we need this information?

EPA needs background information on your facility to evaluate your application.

What do you need to do?

Provide background information on your facility.

5 Complete the Environmental Requirements Checklist on pages 32-38 of the instructions and enclose it with your

• Identify your environmental requirements.



1	What do you do or make at your facility?	Baxter Fenwal Division in Maricao, PR is a medical device industry dedicated to the manufacturing of whole blood collecting units.
		Beside blood collection products, Baxter, Maricao also manufactures their components and other operations such plastic extrusion, compounding, mixing, filling, sterilization, pasteurization and final packing.
2 List the North American Industrial Classification System (NAICS) codes that you use to classify business at your	SIC 2834	
	facility.	RCRA ID No. PRD000706473 NPDES ID NO. PRR05A549
3	Does your company meet the Small Business Administration definition of a small business for your sector?	Yes No
4 Hov	How many employees (full-time equivalents) currently	☐ Fewer than 50
	work at your facility? If you checked "Yes" in question 3 and have fewer than 50 employees at your facility, then you are considered a "small facility" by the Performance Track Program.	□ 50-99
		☐ 100-499
		⊠ 500-1,000
		☐ More than 1,000

application.

Section A, continued

6 Optional: Is there anything else you would like to tell us about your facility? Do you participate in other voluntary programs at the local, tribal, State, or Federal level?

At Baxter Fenwal Division Maricao we are totally committed to continuous improvement not only with the manufacturing phase but also in the environmental aspect of the business. We are committed to pollution prevention program, corrective & preventive actions system, employee involvement, identification of environmental aspect and management review, We have set goals and/or program for waste reduction, chemical management, emergency response and energy and water conservation. We have voluntary active participation with our employees as well with the community in outreach even such, recycling program, and community awareness recycling fair, earth day and others. We also are sponsor of Maricao Forest and no profit or benefical institutions

Why do we need this information?

Facilities need to have an operating Environmental Management System (EMS) that meets certain requirements.

What do you need to do?

- Confirm that your EMS meets the Performance Track requirements.
- Tell us if you have completed a self-assessment or have had a third-party assessment of your EMS.



Read the EMS requirements on page 9-12 of instructions. Tell us if your EMS meets these requirements for:

1	Environmental policy		☐ No	
2	Planning —————		□ No	
3	Implementing and operation	⊠ Yes	□ No	
4	Checking and corrective action	⊠ Yes	□ No	
5	Management review ————————————————————————————————————	⊠ Yes	□ No	
6	Have you done a comprehensive review of all activities conducted at your facility that could impact the environment? (i.e., have you done an aspect analysis?)	⊠ Yes	□ No	
7	Have you classified your aspects based on their potential harm to the environment, on community concerns, and/or on other objective factors? (i.e., have you determined your significant aspects?)	⊠ Yes	□ No	
8	When did you last update your aspect analysis? (mo/yr)	06/02		
9	Have you completed at least one EMS cycle (plan-do-check-act)?	⊠ Yes	□ No	
10	Did this cycle include both an EMS and a compliance audit?	⊠ Yes	□ No	
11	Have you completed an objective self-assessment or third-party assessment of your EMS?	⊠ Yes	□ No	
	If yes, what method of EMS assessment did you use?	Self-asse	essment	Third-party assessment
		GEM	I	
		□ СЕМІ	P	
			environmental	

Why do we need this information?

Facilities need to show that they are committed to improving their environmental performance. This means that you can describe past achievements and will make future commitments.

What do you need to do?

Refer to the Environmental Performance Table in the instructions to answer questions 1 and 2.



Part 1 You must report past achievements for at least two environmental aspects, and you must choose these aspects from the Environmental Performance Table on pages 29-31 of the instructions. Please quantify each of your aspects using the units listed for that aspect in the Environmental PTrack Information Hotline at 1-888-339-PTRK.

Note to small facilities: If you are a small facility, you must report past achievements for only one environmental aspect.

First achievement

1 What aspect have you selected from the Table on page 29-31?	Hazardous Waste	
What units are you using to quantify this aspect? (See Table, page 29-31.)	Lbs	
	PAST	CURRENT
3 List the past annual quantity of the aspect (from two years ago) and the current annual quantity of the aspect (from the most recent year for which you have data).	3,373	1,818
4 What are the years for which you are reporting these quantities?	2001	2002
5 Estimate your past normalizing factor (Page 18 of the Instructions will help you calculate this.)	1.02	1.0
6 What is your normalizing factor based on (e.g., production, employment)?	Production	
7 You reported an improvement in the quantity of the aspect in Question 3. How did you achieve this improvement?	We eliminated a PVDF chemical process. We provide training to those generating the waste and their impact in the environment. We reduce the use cycclohexanone for bonding purpose in our production areas. We monitor the use of chemical and the inventory as well expiration date to avoid excesive hazardous waste disposal. In year 2000 the quantyty of Hazardous waste was 6,083.	

Section C, continued

Second achievement

1 What aspect have you selected from the Table on page 29-31?	Material Use	
What units are you using to quantify this aspect? (See Table, page 29-31.)	Tons	
	PAST	CURRENT
3 List the past annual quantity of the aspect (from two years ago) and the current annual quantity of the aspect (from the most recent year for which you have data).	1,048	860
What are the years for which you are reporting these quantities?	2001	2002
Estimate your past normalizing factor (Page 18 of the Instructions will help you calculate this.)	1.02	1.0
6 What is your normalizing factor based on (e.g., production, employment)?	Production	
7 You reported an improvement in the quantity of the aspect in Question 3. How did you achieve this improvement?	This performance is in regard to the PVC scrap material generated in the production department. We experience 19% of reduction due to the improvement in the quality of the process. In addition we established a new program that represent 22 % of the scrap generated and reused in our plant in Mexico. This 22% represent 189 tons per year which Mexico convert this scrap in finished good product. In addition, we recyccle around 160 tons od corrugated carton and 30 tons of PE and PP.	

Part 2 You must make future commitments for at least four environmental aspects, and you must choose these aspects from the Environmental Performance Table on pages 29-31 of the Instructions. The aspects you select for your future commitments should be related to the objectives and targets in your EMS. Where possible, they also should be identified as having a significant environmental impact in your EMS. No more than two of your aspects can be from the same environmental category. If you're not sure how your objectives and targets fit into our aspects or whether your aspects are significant, call the PTrack Information Hotline at 1-888-339-PTRK.

Once you have chosen your four environmental aspects, then fill in all the necessary information for these aspects in the tables on pages 7-10 of this form. Please quantify each of your aspects using the units listed for that aspect in the Environmental Performance Table. Each table that you must fill in corresponds to one of the environmental aspects you have chosen.

We will assume that your performance commitments are based on a constant production or employment level. If you would like to base your commitment on changing production or employment, please fill out optional questions 6a and 6b.

Note to small facilities: If you are a small facility, you must report future commitments for only two environmental aspects.

Section C, cotinued

First commitment

1	What aspect have you selected from the Table on pages 29-31?	Hazardous Waste		
2	What units are you using to quantify this aspect?	Lbs.		
<i>3a</i>	Is this aspect considered significant in your EMS?	⊠ Yes □ No		
<i>3b</i>	If no, please explain why you believe this aspect should be included as a performance commitment.	Included		
		CURRENT	FUTURE	
4	List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.	1,818	1,500	
5	What are the years for which you are reporting these quantities?	2002	2004	
6a	(Optional) What is your future normalizing factor. (Page 21 of the Instructions will help you calculate this.)	1.0	0.9	
6b	(Optional) What is your normalizing factor based on (e.g., production, employment)?	1.02		
7	You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?	Continue training and provide awareness to those generating the waste and their impact in the environment. Our goal is request a Coditioning Exempt Small quantity (less than 100 Kh/month)		
8a	Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	☑ Yes □ No		
8b	If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.	Small gererator 100 - 1000 kg / month		

Section C, continued

Second commitment

1	What aspect have you selected from the Table on pages 29-31?	Material Use		
2	What units are you using to quantify this aspect?	Tons		
<i>3a</i>	Is this aspect considered significant in your EMS?	⊠ Yes □ No		
<i>3b</i>	If no, please explain why you believe this aspect should be included as a performance commitment.	Included		
		CURRENT	FUTURE	
4	List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.	680	550	
5	What are the years for which you are reporting these quantities?	2002	2003	
6a	(Optional) What is your future normalizing factor. (Page 21 of the Instructions will help you calculate this.)	1.0	0.90	
6b	(Optional) What is your normalizing factor based on (e.g., production, employment)?	Production		
7	You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?	Expand the recycling Program. At present 86% of the total generation is recycled we are commitmen inclease about 5% for 2004.		
8a	Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	⊠ Yes □ No		
8b	If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.	State Solid waste Authority		

Why do we need this information?

Facilities need to demonstrate their commitment to public outreach and performance reporting. You should have appropriate mechanisms in place to identify community concerns, to communicate with the public, and to provide information on your environmental performance.

What do you need to do?

- Describe your approach to public outreach.
- List three references who are familiar with your facility.

Section D

Tell us about your public outreach and reporting.

1	How do you identify and respond to community concerns?	Any concern or complain from our employees, contactor or community must be mange through our corrective and preventive system that is included in an internal SOP.
2	How do you inform community members of important matters that affect them?	We are in close contact with local authorities such as Police, Firefighter station, emergency response office and municipa goverment. They make a walkthrough at lease once a year by the different areas that could be potential for emergency. In addition TIER-II report is submitted to the local agency as weel to EQB every year that indicate our chemical inventory of the plant and the layout where the inventory is localized.
3	How will you make the Performance Track Annual Performance Report available to the public?	
		⊠ Open Houses
		Other

Section D, continued

4	Are there any ongoing citizen suits against your facility?	☐ Yes	⊠ No	
	If yes, describe briefly in the right-hand column.			

5 List references below

	Organization	Name	Phone number
Representative of a Community/ Citizen Group	Local Emergency Oficina Response - Maricao Office	Mr. Alfredo Bonilla	787-838-3344
State/tribal/local regulator	Environmental Quality Board	Mr. Jose Vega	787-864-0103
Other community/local reference (e.g., emergency management official or business associate)	Department of Environmental and Natural Resuorces - Maricao Forest	Mr. Adrain Muñiz	787-838-1045

	Section	
Daxter renwar, Marieao, 1 10		
[my facility],		
	Application and	
I certify that	Participation Statement.	

I have read and agree to the terms and conditions for Application and Participation in the National Environmental Performance Track, as specified in the *National Environmental Performance Track Program Guide* and in the *Application Instructions*;

- I have personally examined and am familiar with the information contained in this Application, including the Environmental Requirements Checklist. The information contained in this Application is, to the best of my knowledge and based on reasonable inquiry, true, accurate, and complete, and I have no reason to believe the facility would not meet all program requirements;
- My facility has an environmental management system (EMS), as defined in the Performance Track EMS
 requirements, including systems to maintain compliance with all applicable Federal, State, tribal, and local
 environmental requirements in place at the facility, and the EMS will be maintained for the duration of the
 facility's participation in the program;
- My facility has conducted an objective assessment of its compliance with all Federal, State, tribal, and local
 environmental requirements, and the facility has corrected all identified instances of potential or actual
 noncompliance;
- Based on the foregoing compliance assessment and subsequent corrective actions (if any were necessary), my facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with applicable Federal, State, tribal, and local environmental requirements.

I agree that EPA's decision whether to accept participants into or remove them from the National Environmental Performance Track is wholly discretionary, and I waive any right that may exist under any law to challenge EPA's acceptance or removal decision.

I am the senior facility manager and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is applying to this program.

Signature/Date	
Printed Name/Title	Mr./Mrs./Ms./Dr. Mr. Benjamin Padilla / Plant Manager
Phone Number/E-mail	787-838-3000
Facility Name	Baxter Healthcare, Fenwal Division
Facility Street Address	Road 357 Km. 0.8 P.O. Box 832
City/State/Zip Code	Maricao, PR, 00606

Environmental Requirements Checklist

Use the Environmental Requirements Checklist to answer Question 5 in Section A, Tell us about your facility. This Checklist will help you identify the major Federal, State, tribal, and local environmental requirements that apply at your facility, but it is not an exhaustive list of all environmental requirements that may be applicable at your facility.

Fill in your facility information below and enclose the completed Checklist with your application.

Air Pollution Regulations

Check all that apply

	1.	National Emission Standards for Hazardous Air Pollutants (40 CFR 61)
\boxtimes	2.	Permits and Registration of Air Pollution Sources
	3.	General Emission Standards, Prohibitions, and Restrictions
	4.	Control of Incinerators
	5.	Process Industry Emission Standards
	6.	Control of Fuel Burning Equipment
	7.	Control of VOCs
	8.	Sampling, Testing, and Reporting
	9.	Visible Emissions Standards
	10.	Control of Fugitive Dust
	11.	Toxic Air Pollutants Control
	12.	Vehicle Emissions Inspections and Testing
Other	(you r	nust list these if applicable)
	13.	Federal, State, tribal, or local regulations not listed above.
	14.	ID Numbers (specify whether State or Federal). Local Synthetic Minor Source Permit No. PFE-02-048-1195-0083-I-II-O

Hazardous Waste Management Regulations

Check all that apply.

\boxtimes	1.	Identification and listing of hazardous waste (40 CFR 261)
	\boxtimes	- Characteristic waste
	\boxtimes	- Listed waste
\boxtimes	2.	Standards Applicable to Generators of Hazardous Waste (40 CFR 262)
	\boxtimes	- Manifesting
		- Pre-transport requirements
		- Record keeping/reporting
	3.	Standards Applicable to Transporters of Hazardous Waste (40 CFR 263)
		- Transfer facility requirements
		- Manifest system and record-keeping
		- Hazardous waste discharges
	4.	Standards for Owners and Operators of TSD Facilities (40 CFR 264)
		- General facility standards
		- Preparedness and prevention
		- Contingency plan and emergency procedures
		- Manifest system, record-keeping, and reporting
		- Groundwater protection
		- Financial requirements
		- Use and management of containers
		- Tanks
		- Waste piles
		- Land treatment
		- Incinerators
	5.	Interim Standards for TSD Owners and Operators (40 CFR 265)
	6.	Interim Standards for Owners and Operators of New Hazardous Waste Land Disposal Facilities (40 CFR 267)
	7.	Administered Permit Program (Part B) (40 CFR 270)
Other	(you	must list these if applicable)
	8.	Federal, State, tribal, or local regulations not listed above
	9.	ID Numbers (specify whether State or Federal). RCRA ID No. PRD000706473

Hazardous Materials Management

Check all that apply.		
	1.	Control of Pollution by Oil and other Hazardous Substances (33 CFR 153)
	2.	Designation of Reportable Quantities and Notification of Hazardous Materials Spill (40 CFR 302)
	3.	Hazardous Materials Transportation Regulations (49 CFR 172-173)
\boxtimes	4.	Worker Right-to-Know Regulations (29 CFR 1910.1200)
\boxtimes	5.	Community Right-to-Know Regulations (40 CFR 350-372)
	6.	Underground Storage Tank Regulations (40 CFR 280-282)
Other (you must list these if applicable)		
	7.	Federal, State, tribal, or local regulations not listed above.
	8.	ID Numbers (specify whether State or Federal). TRI ID No. 00706BXTRFCARR3
Solid	Wast	te Management
Check	call th	hat apply.
	1.	Criteria for Classification of Solid Waste Disposal Facilities and Practices (40 CFR 257)
	2.	Permit Requirements for Solid Waste Disposal Facilities
	3.	Installation of Systems of Refuse Disposal
	4.	Solid Waste Storage and Removal Requirements
	5.	Disposal Requirements for Special Wastes
Other (you must list these if applicable)		
	6.	Federal, State, tribal, or local regulations not listed above.
	7.	ID Numbers (specify whether State or Federal).

Water Pollution Control Requirements

Check all that apply.

\boxtimes	1.	Oil Spill Prevention Control and Countermeasures (SPCC) (40 CFR 112)
	2.	Designation of Hazardous Substances (40 CFR 116)
	3.	Determination of Reportable Quantities for Hazardous Substances (40 CFR 117)
\boxtimes	4.	NPDES Permit Requirements (40 CFR 122)
	5.	Toxic Pollutant Effluent Standards (40 CFR 129)
	6.	General Pretreatment Regulations for Existing and New Sources (40 CFR 403)
		Name of POTW Maricao Treatment Plant
		ID # of POTW PR0020648
	7.	Organic Chemicals Manufacturing Point Source Effluent Guidelines and Standards (40 CFR 414)
	8.	Inorganic Chemicals Manufacturing Point Source Effluent Guidelines and Standards (40 CFR 415)
	9.	Plastics and Synthetics Point Source Effluent Guidelines and Standards (40 CFR 416)
	10.	Water Quality Standards
	11.	Effluent Limitations for Direct Dischargers
\boxtimes	12.	Permit Monitoring/Reporting Requirements
	13.	Classifications and Certifications of Operators and Superintendents of Industrial Wastewater Plants
	14.	Collection, Handling, and Processing of Sewage Sludge
	15.	Oil Discharge Containment, Control and Cleanup
	16.	Standards Applicable to Indirect Discharges (Pretreatment)
Othe	r (you r	nust list these if applicable)
	17.	Federal, State, tribal, or local regulations not listed above.
	18.	ID Numbers (specify whether State or Federal). Local Wastewater Discharge Permit No. GDA-89-308-016

Drinking Water Regulations

Chec	k all th	at apply.
□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	1. 2. 3. 4. 5. 6. (you)	Underground Injection and Control Regulations, Criteria and Standards (40 CFR 144, 146) National Primary Drinking Water Standards (40 CFR 141) Community Water Systems, Monitoring and Reporting Requirements (40 CFR 141) Permit Requirements for Appropriation/Use of Water from Surface or Subsurface Sources Underground Injection Control Requirements Monitoring, Reporting and Record keeping Requirements for Community Water Systems must list these if applicable) Federal, State, tribal, or local regulations not listed above
	8.	Federal, State, tribal, or local regulations not listed above. Natural Resources Department (Well water extraction) ID Numbers (specify whether State or Federal). Permit No. RR-27-01-2000-FI-70025/RF-01-15-96
Toxic Substances		
Chec	k all th	at apply.
	1.	Manufacture and Import of Chemicals, Record-keeping and Reporting Requirements (40 CFR 704)
	2.	Import and Export of Chemicals (40 CFR 707)
\boxtimes	3.	Chemical Substances Inventory Reporting Requirements (40 CFR 710)
	4.	Chemical Information Rules (40 CFR 712)
	5.	Health and Safety Data Reporting (40 CFR 716)
	6.	Pre-Manufacture Notifications (40 CFR 720)
	7.	PCB Distribution Use, Storage and Disposal (40 CFR 761)
	8.	Regulations on Use of Fully Halogenated Chlorofluoroalkanes (40 CFR 762)
	9.	Storage and Disposal of Waste Material Containing TCDD (40 CFR 775)
Other	you i	must list these if applicable)
	10.	Federal, State, tribal, or local regulations not listed above.
	11.	ID Numbers (specify whether State or Federal).

Pesticide Regulations

Check all that apply.

\boxtimes	1.	FIFRA Pesticide Use Classification (40 CFR 162)			
\boxtimes	2.	Procedures Storage and Disposal of Pesticides and Containers			
		(40 CFR 165)			
	3.	Certification of Pesticide Applications (40 CFR 171)			
\boxtimes	4.	Pesticide Licensing Requirements			
	5.	Labeling of Pesticides			
	6.	Pesticide Sales, Permits, Records, Application and Disposal Requirements			
\boxtimes	7.	Disposal of Pesticide Containers			
	8.	Restricted Use and Prohibited Pesticides			
Other (y	ou mu	st list these if applicable)			
	9.	Federal, State, tribal, or local regulations not listed above.			
	10.	ID Numbers (specify whether State or Federal).			
Environ	Environmental Clean-Up, Restoration, Corrective Action				
	1.	Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or Superfund). Please identify and include date of Record of Decision.			
	2.	RCRA Corrective Action. Please provide date of RCRA/HSWA permits that require corrective action.			
	3.	Other Federal, State, tribal, or local environmental clean-up, restoration, corrective action regulations not listed above. Please include date of requirement.			
Facility	Name	Baxter Healthcare Fenwal Division			
Facility	Locat	tion: Maricao, P.R.			

The National Environmental Performance Track is a U.S. Environmental Protection Agency program. Please direct inquiries to 1-888-339-PTRK (7875) or e-mail ptrack@indecon.com.

To submit your application:

1) E-mail the completed application to ptrack@indecon.com,

and

2) Fax the completed an signed Section E (**not** the entire application) to (617) 354-0463.

If you cannot e-mail the application, mail a hard copy of the entire completed application to:

The Performance Track Information Center c/o Industrial Economics Incorporated 2067 Massachusetts Avenue Cambridge, MA 02140

Paperwork Reduction Act Notice

The public reporting and recordkeeping burden for this collection of information is estimated to average 40 hours per response. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.